## RICK AUERBACH ASSESSOR

## COUNTY OF LOS ANGELES • OFFICE OF THE ASSESSOR

500 WEST TEMPLE STREET, ROOM 216 • LOS ANGELES, CA 90012-2770

Telephone 213.893.2492 • Email: helpdesk@assessor.lacounty.gov • Website: assessor.lacounty.gov Si desea ayuda en Español, llame al número 213.974.3211

## INSTRUCTIONS FOR PREPARING COIN OPERATED VENDING AND AMUSEMENT MACHINES REPORT

Section 441, Revenue and Taxation Code of the State of California, requires that all property in the state at 12:01 a.m. on January 1st shall be reported annually, under oath, to the assessor of the county in which it is situated.

## NAME

- **OWNER'S** Print full name of sole proprietorship; full name of all partners if a partnership; complete corporate name if a corporation.
  - Enter the trade name if any, under which the business is operated; if none, leave it blank.
  - Enter complete address, including zip code, where tax bill is to be mailed.
  - Enter telephone number.
- **TYPE OF** Indicate corporation, partnership, or sole proprietorship by a check mark in the appropriate square. **OWNERSHIP**
- **MACHINES**
- **LOCATIONS OF** Enter the name and address of each business where machines on route are located as of 12:01 a.m., January 1st. Group locations by city within the county.
  - **QUANTITY** Enter number of units or machines at each location.
    - **TYPE** Enter type of machine: drink, food, games, movies, music, etc.
- **DESCRIPTION** Enter manufacturer's trade name, model and capacity in units, columns, containers, or selections.
  - **YEAR** Enter the year in which you acquired the machine.
  - **ACQUIRED** Indicate whether you acquired the machine new or used.
    - COST
    - TOTAL Enter the original cost (including freight-in, excise, sales and use taxes and installation costs) before allowance for depreciation for each item of equipment reported. If a trade-in was deducted from the invoice price, enter the invoice price. Add back investment credits taken for federal income tax purposes if these were deducted from the original cost. Include all fully depreciated items at original cost, whether written off or not.
- **NOT ON ROUTE**
- **EQUIPMENT** Stored and out of use machines should be reported separately, in the same reporting format as the machines out on route.

**OFFICE FURNITURE;** 

SHOP EQUIPMENT; • Report the cost of all other business personal property on form BOE-571-L, Business Property Statement.

OFFICE, WAREHOUSE, AND **COMPUTER EQUIPMENT:** LEASEHOLD AND/OR **BUILDING IMPROVEMENTS** 

If you have sold your vending or amusement machines since the last lien date (since 12:01 a.m., January 1 of the prior year), please show the date of sale and the name, address, and phone number of the purchaser. Please fill out applicable areas of form BOE-571-L. Sign, date and return the original BOE-571-L along with your Coin Operated Vending and Amusement Machine Report (B-36) to the Assessor's Office. If you have questions, call the County Assessor, Major Personal Property Division, Area 6. Telephone (213) 893-2492.

All report forms must be completed in detail by the assessee and filed with the Assessor on or before April 1st, annually. Incomplete reports will not be accepted.

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LOS ANGELES, CA 90012-2770 ATTENTION: BUSINESS DIVISION, AREA 6  MAILING STREET CITY STATE ZIP	PARTNEI SOLE OV	RSHIP WNERSHIP	
ATTENTION: BUSINESS DIVISION, AREA 6 MAILING STREET CITY STATE ZIP	SOLE OV	WNERSHIP	
		SFORM	
LIST CITIES IN ALPHABETICAL ORDER  The following is a report of all coin operated vending and amusement machines owned, claimed, possessed, controlled, or managed by me located in Los Angeles County on the lien date 12:01 a.m. January 1.  PLEASE USE BOTH SIDES	FOR ASSE		
LOCATION OF MACHINES DESCRIPTION OF MACHINES TOTAL COST INCLUDING		ESSOR'S USE ONLY	
CITY NAME OF BUSINESS STREET ADDRESS QUANTITY DRINK, GAME, MADE IN ADDE LAND CAPACITY YEAR ACQUIRED NEW?  ALL TAXES, FREIGHT AND INSTALLATION OF EACH MACHINE	FACTOR	APPRAISED VALUE	
CITY NAME OF BUSINESS STREET ADDRESS	FACTOR	MACHINE	
I the undersigned, hereby declare under behalty of periury that this report is true, correct and complete	OTAL HIS PAGE		
SIGNED TITLE DATE TO	OTAL APPRAISED /ALUE		

	LOCATION OF MACHINES			DESCRIPTION OF MACHINES				TOTAL COST INCLUDING	FOR ASSESSOR'S USE ONLY		
CITY	NAME OF BUSINESS	STREET ADDRESS QUANTI	QUANTITY	TYPE DRINK, GAME, FOOD, MUSIC, ETC.	TRADE NAME, MODEL AND CAPACITY IN COLUMNS, CUPS, ETC.	YEAR ACQUIRED	ACQ NE YES	UIRED EW? NO	TOTAL COST INCLUDING ALL TAXES, FREIGHT AND INSTALLATION OF EACH MACHINE (OMIT CENTS)	FACTOR	APPRAISED VALUE MACHINE
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